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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

None  
as

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

None  
as

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <u>                    </u> Examiner's Signature Initials	STATE OR COUNTRY MEXICO	SHEETS DRAWING 4	TOTAL CLAIMS 15	INDEPENDENT CLAIMS 2
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## TITLE

Cross-straight groove joint

FILING FEE  RECEIVED 770	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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